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The Role of Paralinguistic Means in Medical Speech

Yunusova Maftina Shokirovna

Intern-researcher of Bukhara State University, Uzbekistan

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ANNOTATION

In this article, we have provided information about paralinguistic tools. The article talks about the role and use of paralinguistic means. Medicine and related information is disclosed. Doctor's speech': the article presents the verbal relationship between the doctor-patient and his relatives, at the same time, non-verbal actions of the doctor and the patient are expressed with examples. The role and study of paralinguistic means is highlighted. In this article, one of the most difficult areas of psychology, and perhaps one of the most controversial, is devoted to non-verbal communication. Several functions of speech are mentioned, one way or another recognized by representatives of various psychological and linguistic schools. They may have very different approaches to many positions, but they all emphasize the fact that speech plays a crucial role in many psychological processes, primarily thought processes.

KEYWORDS: Paralinguistics, Paralinguistic means, Verbal and non-verbal speech, Medicine, Medical discourse, Doctor-patient relationship.

I. Introduction

Paralinguistics studies non-verbal verbal communication factors involved in information transfer and carrying a certain semantic load - extralinguistic information.

In the first minutes of communication with patients, the doctor has the opportunity to assess the socio-biological characteristics of the subject's speech: age, gender, social status (and their appearance and behavior), dialect, accent; spatial characteristics (location of the speaker in relation to the listener, his movement); medical - general state of health, both physical and mental, state of the speech system and vocal apparatus. In addition, individual paralinguistic features of their unity are studied in detail. During communication, information is exchanged between two people. In the process of communication, the subject and the addressee use various facial expressions and non-verbal actions. It helps to make the conversation more effective or economical. Such non-verbal means have different meanings depending on the speech conditions.

Interrogation: One shake of the head (means "where are you going").

Answer: I'm going home.

Or a question: That action ("What are you doing?").

Answer: I need to organize my bookshelves.

In the above example, two different meanings are derived from the same action, of course, this happens in the course of speech.

Paralinguistic tools are diverse. They create colorful communication in different situations. The more resistance there is during communication, the more paralinguistic tools are used. Paralinguistic tools are often used when they are far from each other or close together and the noise level is high.

We use such non-verbal actions very often in our daily life. Such facial expressions give us a lively conversation.

1. - Have fun, posh girl! Zuhra squinted her dark eyes.[1]
2. U. squinted his eyes as if to say "Now I'll show you something" and started to take down the blankets on the camel box. [2]

In the given examples, the single action "wink" means two different meanings.

In the above examples, wink is used in the first example as "joke" and in the second as "warning".

In the Uzbek language, such facial expressions are reflected in gestural verbs:

Pucker your lips, wink your eyes, wrinkle your nose, frown, wave your hand, raise your eyebrows, shake your head, shake your hand, make a face, etc.

Such paralinguistic tools are used by all professionals. It is natural for doctors to use non-verbal means as well. Such actions of them are used within the layer of doctor-patient, doctor-patient relatives and mutual colleagues.

This study examines speech production during oral communication between a doctor and a patient, and paralinguistic features in the speech of a medical professional. Different types of statements are observed in oral medical speech: descriptive, narrative, argumentative, direct, depending on the doctor's task. These types of sentences are expressed by special speech formulas, as well as by specific paralinguistic features of the voice.

At the time of communicating with the patient, the doctor should take into account the patient's illness, age, social background, profession and level of medical knowledge, mentality, and be able to listen to the patient. Since the diseases of patients are different, communication with patients should also be different. A doctor talks to a patient with oncological pain about this disease. Gynecological doctor communicates as a gynecologist. It depends on the aspects of the patients related to the disease. Of course. Different types of patients have different mental states, some can handle the correct diagnosis, some can't handle it, and some panic. As a result of this, as Ibn Sina said: "The fear of illness is strong, and additional diseases begin to appear in them.[3] This theory has already been proven. Such patients often suffer from cardiovascular diseases and nervous diseases, and in some cases it can even end in death.

The purpose of this article is to reveal the paralinguistic and extralinguistic features of the conversation between a medical specialist and a patient. Communication between a doctor and a patient is carried out within a medical institution, i.e. it is determined by certain rules and rituals (united, as a rule, white uniform, tools, organization of space, location of the patient, distance between him and the doctor, etc.).

Communicative aspects of medical speech affect the effectiveness of the treatment process. The doctor's ability to communicate with the patient is important.

Both genres are analyzed in medical discourse: primary examination and preventive medical examination. Non-verbal communication was observed in the appearance, gestures, facial expressions, tone, intonation, tempo, etc. of the doctor's speech. When communicating with the patient, the medical worker uses various communication strategies and tactics, combines them or changes them in sequence in the following cases. This method is to find a way in communication with the patient. In this strategy, the patient cooperates. For the patient, the proof of truth for verbal communication with the medical professional is special attention, approach, information acquisition, diagnosis, recommendation, treatment prescription strategies, as well as mutual knowledge, politeness (Hello!, Good day! is expressed through politeness formulas), focuses on individual tactics such as cooperation and so on.

II. Literary Review

In recent years, new branches of medicine have been actively developing: borderless medicine, emergency medicine, disaster medicine, palliative medicine, cryomedicine, IT medicine, aesthetic medicine, telemedicine, medical marketing and many other fields that require the training of highly skilled and qualified specialists. .

In this regard, medical speech remains a subject of active study by specialists in the field of language and speech communication (V.I. Karasik, T.V. Kochetkova, I.A. Ivanchuk, L.S. Beilinson, M.I. Barsukova, V.V. Jura, etc.). A detailed study of medical speech allows to present a portrait of the doctor's speech, to determine the most effective methods of speech influence on the patient.

Nonverbal communication is most important in a medical interview when it contradicts verbal communication messages. Interviews should consider two closely related aspects of nonverbal communication: patients' nonverbal behaviors and patients' verbal behaviors. As clients, we need to recognize and learn the non-verbal cues in our patients' speech, facial expressions, and body posture.

III. Materials and methods

Doctor-patient communication tells us that patients pay close attention to their doctors and pick up on a number of non-verbal cues during consultations. In one such observational study, doctors' tone of voice and level of eye contact were particularly associated with patients' signs that their doctors were not interested in them. Younger, more educated patients were more likely to comment on doctors' behavior because they knew more about it or were more comfortable reporting it to researchers. It's not surprising that patients find some doctors more convenient than others, offering different services to different doctors. British pioneers in the study of counseling 30 years ago. Byrne and Heath studied in detail the effect of doctors' nonverbal behavior on their patients and made similar observations. They found that the doctor's eye contact and posture affected the situation. They also found that the way the doctor used medical records (not computerized in those days) was very important in influencing the issues raised by patients. [4]

Physicians' own nonverbal behaviors are easily overlooked in the study of communication. Many tools for measuring qualities such as patient-centeredness may not be detailed enough to capture their opinions on audio rather than videotapes. However, a growing body of work over the last 20 years has shown the following results between physicians' nonverbal communication (in the form of eye contact, nods and gestures, posture, and tone of voice) showed associations with: patient satisfaction, patient understanding,

physician perception of emotional distress, and history of medical malpractice. Although much work remains to be done, there is now strong evidence that customers should pay close attention to their nonverbal behavior.

IV. Result and discussion

It is generally accepted that verbal communication during medical consultations is important in the delivery of medical care and is generally easy to interpret and analyze. It is discrete with clear endpoints, occurs in a single mode, is largely under voluntary control, and conveys our cognitive thoughts more than our emotions. In contrast, non-verbal communication is more difficult to interpret: it continues even when silent, can occur in several modes at once, operates at a less conscious level, gives signals on its own, and affects the relationship. It is the channel of emotions most responsible for its transmission. Thus, we should not be surprised that nonverbal communication plays an important role in the medical interview and is an important variable in the doctor-patient relationship. Nonverbal communication helps build relationships, signals hidden concerns and emotions, and helps reinforce or refute our verbal comments.

Patient's month: Doctor, take a look at my daughter's ultrasound. There is a very small hole in the fleshy part of the heart. It is written in the conclusion as a heart-parog. My daughter is now a week old. Will it get better?

Doctor: So UZI saw the summary sheet and calmly waved his hand from bottom to top and said nothing else.

In the above example, we can see that this is not a serious disease, it can be understood by the movement of "hand waving".

A doctor is a unique profession, it is rightfully called a human science. This is a doctor who accompanies each of us throughout our lives: neuropathologists and pediatricians, specialists in all medical fields and specialties, gerontologists and geriatricians.[8] (Gerontology (Greek: geron, gerontos - old, old and ... logy) is a science that studies living organisms, including the aging process of a person; a branch of medicine and biological sciences. [7] The doctrine of the characteristics of diseases of an elderly organism - geriatrics)

The realities of modern life demand the need for cooperation between doctors of different countries and the joint activity of experts from different fields of knowledge.

The doctor's speech can be divided into two depending on the gender:

1. Male doctor's speech.
2. Speech of a female doctor.

They have similar aspects, of course, in their profession. But they differ from each other in gender, character and characteristics. Their conversation and communication with the patient also differs according to the nature of gender. For example, male doctors are generally less talkative, faster, and some of them may be more blind, while women are more polite and approach patients with a smile. Such actions (smiling, gentle gestures with hands) make the patient feel more free and increase trust in the doctor. The non-verbal actions used by the doctor in his speech are very important for the client. Because the patient can communicate his illness more widely or freely depending on the doctor's behavior. It can be seen that non-verbal and mime actions shed light on many things even during silence.

The doctor, coming out after a difficult surgery, hit the patient's close relative three times on the shoulder.

The above "three claps" indicates that the patient is dead.

V. Conclusion and recommendation

Changes in society and medical practice have encouraged patient participation in consultations and waiting. Patients are encouraged to ask questions and are expected to be more involved in decision making. This leads to better communication between the doctor and the patient.

Currently, in medicine, a special class of psychosomatic diseases is distinguished, the cause of which is the negligent and rude words of the doctor. So that it does not serve as a strong psycho-traumatic factor, the doctor must be familiar with certain communication technologies: the specialist should not leave the patient in a state of fear and ignorance after the announcement of the diagnosis; it is appropriate to use clinical terms and professional expressions in the presence of the patient. The doctor's speech skills show the need to inform the patient and his relatives, especially in critical situations related to serious diseases.

The doctor's speech should not be overloaded with only medical terms and professional words. An experienced specialist with a wide range of speech can always create an atmosphere of trust and mutual respect necessary for the treatment of the disease, comfortable for the patient, through his actions and facial expressions. The doctor's speech should always be clear, his actions should be understandable, appropriate to the specific situation.

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